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# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### **EASTERN DIVISION**

§

Case No. 07 B 24278

Debtor	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	<b>§</b>
СНАРТ	ER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT
	farshall, chapter 13 trustee, submits the following Final Report and Account of the of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:
1)	The case was filed on 12/27/2007.
2)	The plan was confirmed on 03/17/2008.
on (NA).	The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329
4) plan on 06/07	The trustee filed action to remedy default by the debtor in performance under the /2010.
5)	The case was dismissed on 07/26/2010

- 5) The case was dismissed on 07/26/2010.
- 6) Number of months from filing or conversion to last payment: 31.
- 7) Number of months case was pending: 33.
- 8) Total value of assets abandoned by court order: (NA).
- 9) Total value of assets exempted: \$2,410.93.
- 10) Amount of unsecured claims discharged without full payment: \$0.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

Kizer, Eddie T

### **Receipts:**

Total paid by or on behalf of the debtor \$5,644.90

Less amount refunded to debtor \$94.31

**NET RECEIPTS:** \$5,550.59

## **Expenses of Administration:**

Attorney's Fees Paid Through the Plan \$3,479.50

Court Costs \$0

Trustee Expenses & Compensation \$362.08

Other \$0

#### TOTAL EXPENSES OF ADMINISTRATION:

\$3,841.58

Attorney fees paid and disclosed by debtor \$350.00

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
Illinois Dept Of Healthcare And Fan	ni Priority	\$8,151.00	\$13,000.72	\$13,000.72	\$1,691.54	\$0
Illinois Dept Of Public Aid	Priority	\$2,425.00	NA	NA	\$0	\$0
Internal Revenue Service	Priority	\$500.00	\$200.00	\$200.00	\$17.47	\$0
America's Financial Choice Inc	Unsecured	\$300.00	\$396.17	\$396.17	\$0	\$0
City Of Chicago Dept Of Revenue	Unsecured	\$2,000.00	\$120.00	\$120.00	\$0	\$0
Consultant Radiology of Evanst	Unsecured	\$698.00	NA	NA	\$0	\$0
Credit Collection	Unsecured	\$1,072.98	NA	NA	\$0	\$0
ER Solutions	Unsecured	NA	\$134.41	\$134.41	\$0	\$0
H & F Law	Unsecured	\$162.00	NA	NA	\$0	\$0
Harris & Harris	Unsecured	\$1,665.00	NA	NA	\$0	\$0
Illinois Collection Service	Unsecured	\$5,648.00	NA	NA	\$0	\$0
Illinois Collection Service	Unsecured	\$184.00	NA	NA	\$0	\$0
Illinois Dept Of Public Aid	Unsecured	\$5,726.00	NA	NA	\$0	\$0
Illinois Dept of Revenue	Unsecured	\$300.00	\$34.99	\$34.99	\$0	\$0
Internal Revenue Service	Unsecured	NA	\$100.00	\$100.00	\$0	\$0
John H Stroger Jr Hospital	Unsecured	\$1,329.20	NA	NA	\$0	\$0
Medical Business Bureau Inc	Unsecured	\$320.00	NA	NA	\$0	\$0
						(Continued)

Scheduled Creditors:	(Continued)					
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
Miles Square Health Center	Unsecured	\$15.00	NA	NA	\$0	\$0
Nationwide Cassel LLC	Unsecured	\$6,665.00	\$7,625.28	\$7,625.28	\$0	\$0
NCO Financial Systems	Unsecured	\$288.00	NA	NA	\$0	\$0
NCO Financial Systems	Unsecured	\$29.00	NA	NA	\$0	\$0
Northwest Collectors	Unsecured	\$698.00	NA	NA	\$0	\$0
Omni Credit Service	Unsecured	\$968.00	NA	NA	\$0	\$0
RCN	Unsecured	\$947.00	NA	NA	\$0	\$0
State Farm Insurance Co	Unsecured	\$3,191.38	NA	NA	\$0	\$0
Van Ru Collection Agency	Unsecured	\$2,130.74	NA	NA	\$0	\$0

Summary of Disbursements to Creditors:						
	Claim Allowed	Principal Paid	Interest Paid			
Secured Payments:						
Mortgage Ongoing	\$0	\$0	\$0			
Mortgage Arrearage	\$0	\$0	\$0			
Debt Secured by Vehicle	\$0	\$0	\$0			
All Other Secured	\$0	\$0	\$0			
TOTAL SECURED:	\$0	\$0	\$0			
Priority Unsecured Payments:						
Domestic Support Arrearage	\$13,000.72	\$1,691.54	\$0			
Domestic Support Ongoing	\$0	\$0	\$0			
All Other Priority	\$200.00	\$17.47	\$0			
TOTAL PRIORITY:	\$13,200.72	\$1,709.01	\$0			
GENERAL UNSECURED PAYMENTS:	\$8,410.85	\$0	\$0			

UST Form 101-13-FR-S (09/01/2009)

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Expenses of Administration \$3,841.58

Disbursements to Creditors \$1,709.01

TOTAL DISBURSEMENTS:

\$5,550.59

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12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Date: September 22, 2010 By: \_/s/ MARILYN O. MARSHALL Trustee

**STATEMENT:** This Uniform Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.